

MULTIPLE INVENTION CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO.	FILING DATE		
						APPLICANT(S)			
CLAIMS									
CLAIM NUMBER	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		IND.	DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
1.							51		
2.							52		
3.							53		
4.							54		
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6.							56		
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42.							92		
43.							93		
44.							94		
45.							95		
46.							96		
47.							97		
48.							98		
49.							99		
50.							100		
TOTAL CLAIMS	IND.	DEP.	IND.	DEP.	IND.	DEP.	TOTAL IND.	DEP.	
TOTAL DEP.									
TOTAL IND.									
TOTAL DEP.									
TOTAL CLAIMS									

Best Available Copy